



Berkeley County
Office of the Planning and Zoning Department
PO Box 6122
Moncks Corner, SC 29461-6120

HOME OCCUPATION APPROVAL APPLICATION

Directions: Fill out the general and property information, read and initial the criteria and stipulations, sign the application, and enclose the fifty dollar (\$50.00) processing fee. (Checks are payable to Berkeley County).

General Information

Applicant's Name: _____

Address: _____

Phone: Home _____ Work _____

Property Information

Property Address: _____

Property Tax Map #: _____

Directions to Property: _____

Zoning District: _____ Use of Property: _____

****PLEASE ATTACH A COPY OF YOUR PLAT****

Please answer the following questions pertaining to your Home Occupation:

1. Describe the type of Home Occupation (attach additional sheets if necessary):

2. Do you intend to erect signs? YES____ NO____ If yes, explain_____

3. Square footage of home _____ Area of home occupation_____

4. I (own)_____, or (rent)_____ the dwelling where the home occupation (business) will be conducted. (Please circle one) If renting, a letter from the property owner must be provided acknowledging the Home Occupation.

5. Is this property part of any HOA or Community Associations? YES____ NO____ If yes a letter from the HOA or Community Association is required acknowledging the Home Occupation.

Below are the minimum criteria and stipulations in order to qualify as a home occupation. Please read each statement carefully and initial, and sign below to acknowledge that you agree to comply with all provisions of this form. Home occupations are authorized if they comply with the performance standards set for herein, per §11.9.1 of the Zoning Code:

A. *Accessory use.* Home occupations that comply with the regulations shall be allowed as an accessory use to any allowed residential or agricultural principal use.

1. _____ The proposed Home Occupation is an accessory use to the zoning district's permitted principal use of a residence _____ or an agricultural _____ use (Check One).

B. *Prohibited uses.*

1. Vehicle/equipment repair, rental or sales. Any type of repair, rental, sales, or assembly of vehicles or equipment with internal combustion engines (such as autos, motorcycles, scooters, snowmobiles, outboard marine engines, lawn mowers, chain saws, and other small engines) or of large appliances (such as washing machines, dryers, and refrigerators) or any other work related to automobiles and their parts is prohibited as a home occupation.
2. Restaurants. Restaurants and food service establishments are not allowed as home occupations.
3. Employee dispatch centers. Dispatch centers, where employees come to the site to be dispatched to other locations, are not allowed as home occupations.
4. Animal care or boarding. Animal care or boarding facilities (including animal hospitals, kennels, stables, and all other types of animal boarding and care facilities) are not allowed as home occupations.
5. Medical offices or clinics.
6. Funeral home.
7. Other uses determined by the zoning administrator to have a detrimental effect on the surrounding neighborhood.

2. _____ The proposed Home Occupation will not include any of the above prohibited uses.

C. *Employees.* No person who is not a resident on the premises shall be employed specifically in connection with the activity, except that not more than one assistant may be employed by the following home occupations: lawyer, realtor, salesman, and other similar professional occupations.

3. _____ Employees will not be employed in the home occupation except as permitted by the above provision.

D. *Customers.* Customers may visit the site of a home occupation only during the hours of 6:00 a.m. and 6:00 p.m.

4. _____ Customers will not be permitted to conduct business before 6:00 a.m. or after 6:00 p.m.

E. *Floor area.* No more than 25 percent of the total floor area of the dwelling unit may be used to house a home occupation.

5. _____ No more than 25% of the dwelling's heated floor area will be used for the home occupation.

F. *Outdoor activities.* No activities associated with the home occupation will be allowed outside the principal structure.

6. _____ No activities associated with the home occupation will occur outside the home.

G. *Exterior appearance.* There shall be no visible evidence of the conduct of a home occupation when viewed from the street right-of-way or from an adjacent lot. Examples of prohibited alterations include construction of parking lots, paving of required setbacks, construction of additional entrances, or use of commercial lighting.

7. _____ The home occupation will not be visibly evident outside of the home.

H. *Operational impacts.* No major mechanical equipment shall be installed or used for domestic or professional purposes. No home occupation or equipment used in conjunction with a home occupation may cause odor, vibration, noise, electrical interference, or fluctuation in voltage that is perceptible beyond the lot line. No hazardous substances may be used or stored in conjunction with a home occupation.

8. _____ No mechanical alterations, disturbance of adjacent properties, or hazardous storage will occur as a result of the home occupation's operation.

I. *Deliveries.* No more than four deliveries or pickups of supplies or products associated with home occupations are allowed per week.

9. _____ Deliveries and/or pickups will occur no more than four times a week.

J. *Sales.* No article, product, or service may be sold in connection with a home occupation, other than those produced on the premises.

10. _____ No articles, products or services, except those produced on site, will be sold.

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT, THAT I AM THE RESIDENT OF THE IDENTIFIED PREMISES, AND I AGREE TO COMPLY WITH ALL PROVISIONS OF THIS FORM.

Applicant's Signature: _____ Date: _____

***** APPROVAL *****

Approval becomes void upon a violation of any provision contained herein or termination of the applicant's residency. The permission hereby granted is not transferable to any other resident, address, or other occupation.

Zoning Official: _____ Date: _____